

# SPECIAL AGREEMENT CHECKS (SAC)

OFI FORM 86C  
MANAGEMENT  
November 1990

U.S. OFFICE OF PERSONNEL

OFFICE OF FEDERAL INVESTIGATIONS

|  |   |  |                                       |                           |
|--|---|--|---------------------------------------|---------------------------|
| Agency Agreement Number  | <b>94-01</b>  | OPM USE ONLY   | OPM Codes                             | Case Number               |
| AGENCY USE ONLY (COMPLETE ITEMS 1 THROUGH 14 USING INSTRUCTIONS FROM THE BACK) |   |  |                                       |                           |
| 1. SUBJECT=S FULL NAME   |   |  |                                       | 2. DATE OF BIRTH          |
| Last Name  | First Name  | Middle Name  | Abbrev.                               | Month Day Year            |
| 3. PLACE OF BIRTH Use the two letter code for the State                        |   |  |                                       | 4. SOCIAL SECURITY NUMBER |
| City   | County  | State  | Country (If not in the United States) |                           |
| 5. OTHER NAMES USED AND DATES WHEN USED  |   |  |                                       |                           |
| Name   | Month/year to Month/year  | Name   | Month/year to Month/year              |                           |
| Name   | Month/year to Month/year  | Name   | Month/year to Month/year              |                           |
| SEX<br><input type="checkbox"/> Female <input type="checkbox"/> Male           |   | SPECIAL AGREEMENT CODES<br><div style="text-align: center; font-weight: bold;">R</div> |                                       | 8. POSITION TITLE         |
| 9. SON<br><div style="text-align: center; font-weight: bold;">1 5 3 1</div>    | 10. SOI<br><div style="text-align: center; font-weight: bold;">C M 05</div> | OPAC/ALC NUMBER  |                                       | 12. ACCOUNTING DATA       |

1. OTHER INFORMATION REQUIRED BY AGREEMENT - CHECK ANY REQUIRED BLOCKS BELOW AND CONTINUE TO PAGE 2

- ☐ (Code E) Credit Record.   
 ☐ (Code F) Selective Service Record   
 ☐ (Code G) Military Personnel Record  
☐ (Code I) Immigration and Naturalization Service Record   
 ☐ (Code N) Bureau of Vital Statistics Record

|   |           |                  |      |
|---|-----------|------------------|------|
| Requesting Official Name and Title            | Signature | Telephone Number | Date |
| Joseph A Lubin<br>Regional Security Assistant |           | 206-526-4317     |      |